

Frequently Asked Questions From Caregivers About Heart Attack/Stroke Survivors

How long will my loved one be this helpless?

Be prepared that your loved one may not be able to do all that he or she could before the heart attack or stroke. Recovery from a heart attack or stroke takes time and patience. Some people are able to recover more fully than others. Talk to your medical team to get a better understanding of what to expect for the future. The rehabilitation process enables many people to do much more than they ever expected. The key is time and patience.

Before the heart attack and heart surgery, my loved one was the original couch potato. I don't want to push too hard, but he just doesn't want to get moving. Any suggestions?

First, the doctors should clearly outline how much and what type of physical activity your loved one needs. If your loved one says that's too much, take it up with the doctor. You can help by coming up with ideas that will make exercise easier for your loved one:

- offer to take a walk together
- get a stationary bike he can ride while watching television
- start being more active yourself and then draw your loved one in
- be patient and don't nag

Your loved one might be afraid that exercising will cause something else to happen. Get the doctor to help calm those fears and explain the health benefits of exercise and the health risks of staying inactive.

My loved one is so angry about this heart attack. Is this normal?

It's not at all unusual for heart attack and stroke survivors to be angry and agitated. After all, they — and perhaps, you — are having to change the way things are done in daily life. Change like that is hard. It also takes time and skill. It's especially important for everyone involved to recognize the signs of depression. It's a common after-effect of a stroke or heart attack, and needs to be understood and treated.

How can I give my loved one the care needed when he won't speak to me?

Your loved one may not be able to speak clearly, especially if he is a stroke survivor. Be sure your loved one has been fully evaluated to see if there is a medical or physiological reason for not speaking. Depression from a major medical trauma may also be the cause. Review the signs of depression and talk with the doctor if you suspect it. Finally, be patient. Your lives have changed. That takes some getting used to. Don't let your loved one's silence keep you from communicating with him.



8627 N. Mopac Expwy • Suite 230 • Austin, TX 78759

512.380.9339

www.PracticalCare.com

How can I tell if my loved one is depressed or just discouraged?

It's natural for someone who's had a major medical problem to feel blue or become depressed. Often it's because of physiological changes that are a result of the medical problem. Other times a person is scared about what the future holds. As a caregiver, you need to be on the alert for symptoms of depression. If you suspect your loved one is depressed, tell the doctor. There are excellent medications that can help someone get through depression.

My loved one has nothing to say to family and friends when they come to visit. How can I encourage participation?

It's possible that the stroke caused some injury to your loved one's brain. He/she might not fully comprehend what's going on or what people are saying. Talk to the healthcare professionals to determine if the injury was in an area that could affect hearing, comprehension or speaking ability. If so, find out what course of rehabilitation is needed to recover as much of those functions as possible. Once again, depression might be the cause. Review the signs of depression. Ask the doctor about medication for depression.

My loved one talks about dying, feels less than a person, and refuses to go see a doctor. What can I do?

This is very serious and needs quick attention. Contact the doctor and explain your concerns. The doctor will tell you the best way to get your loved one in for an appointment. There are medications that can help depression, and the doctor can recommend a counselor.

Depression Signs and Symptoms

Clinical depression is distinguished from situational depression by length and severity

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| Feelings of helplessness and hopelessness | A bleak outlook—nothing will ever get better and there's nothing you can do to improve your situation. |
| Loss of interest in daily activities | No interest in or ability to enjoy former hobbies, pastimes, social activities, or sex. |
| Appetite or weight changes | Significant weight loss or weight gain—a change of more than 5% of body weight in a month. |
| Sleep changes | Either insomnia, especially waking in the early hours of the morning, or oversleeping (also known as hypersomnia). |
| Psychomotor agitation or retardation | Either feeling “keyed up” and restless or sluggish and physically slowed down. |
| Loss of energy | Feeling fatigued and physically drained. Even small tasks are exhausting or take longer. |
| Self-loathing | Strong feelings of worthlessness or guilt. Harsh criticism of perceived faults and mistakes. |
| Concentration problems | Trouble focusing, making decisions, or remembering things. |

Depression Signs/Symptoms from: http://www.helpguide.org/mental/depression_signs_types_diagnosis_treatment.htm

My loved one weighs 200 pounds. How can I bathe him?

If your loved one is disabled from a heart attack or stroke or weak from heart surgery, you may not be able to take care of all his needs by yourself. Contact **Practical Care Continuum** for assistance. We can help you in this and many other ways. At the very least, we can show you how to give a sponge bath by yourself. Or we can provide staff to bathe him regularly. Put a stool in your shower or bathtub with a rubber mat underneath it. This helps patients who are weak or dizzy.

FAQs from the American Heart Association, www.americanheart.org